

# OREGON MEDICAL BOARD REPORT

Volume 131 No. 2 Spring 2019 www.oregon.gov/OMB

The mission of the Oregon Medical Board is to protect the health, safety and wellbeing of Oregon citizens by regulating the practice of medicine in a manner that promotes access to quality care.

## **EMS Medical Director Joins the Board**

hristoffer Poulsen, DO, is board-certified in Emergency Medicine and Emergency Medical Services. He is a physician partner of a private,



Christoffer Poulsen, DO

emergency medicine group that staffs three hospitals in Springfield, Eugene, and Cottage Grove. Additionally, he is the medical director of the Emergency Department at Peace Health Sacred Heart RiverBend Medical Center and serves as the Chair of the Department of Emergency Medicine serving the Peace Health hospitals in Eugene, Springfield, and Cottage Grove.

Dr. Poulsen also serves as the supervising physician for Eugene Springfield Fire and Lane Fire Authority and is a medical director for REACH Air Medical and the EMS Paramedic training program at Lane Community College. He is an Affiliate Assistant Professor of Emergency Medicine at OHSU and routinely engages in clinical teaching of medical and

physician assistant students.

Dr. Poulsen received his undergraduate degree in Biological Sciences from Mary Washington College and he graduated with a degree in Osteopathic Medicine from Midwestern University in Chicago. He trained in Emergency Medicine at the University of Illinois College of Medicine at Peoria. In 2008, Dr. Poulsen moved to Eugene, Oregon.

He served on the Oregon Health Policy Board's Oregon Medical Liability Task Force and later became a member of the Oregon Medical Board's EMS Committee, eventually serving as Chairperson.

In his free time, Dr. Poulsen enjoys nature photography in the beautiful outdoors of Oregon and sports photography at many different sporting events for the University of Oregon. He also enjoys camping, cycling, rafting, and spending time with his three children.

Dr. Poulsen succeeds Katherine Fisher, DO, who completed two consecutive terms after joining the Board in 2013. •

Inside This Issue	
CMS Medicare Part D Opioid Overutilization Policies for 2019	2
Chronic and Acute Opioid Guidelines	2
The Oregon Wellness Program: An Update	3
2018 Customer Satisfaction Survey	4
Licensees' Publicly Available Information	5
New Research on Pain Management Messaging	5
Physician Assistant Dispensing	6
DEA Warning	6
Creating Our Own Future Health Care Workforce in Oregon	7
Administrative Rules	8
EMS Advisory Committee Opening	8
Board Actions	9
Community Workers' Compensation	10

#### **Statement of Purpose**

Page 2 Spring 2019

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# CMS New Medicare Part D Opioid Overutilization Policies for 2019

The opioid epidemic is a top priority at the Centers for Medicare & Medicaid Services (CMS). CMS finalized new Medicare Part D opioid overutilization policies which include improved safety alerts when opioid prescriptions are dispensed at the pharmacy, and drug management programs to better coordinate care when chronic, high-risk opioid use is present.

Beginning in January 2019, Medicare Part D plans are employing new safety alerts at the pharmacy:

- 7-day supply limit for opioid naïve patients, and
- Opioid care coordination alerts when a Medicare patient presents an opioid prescription and their cumulative morphine milligram equivalent (MME) per day across all of their opioid prescriptions reaches or exceeds 90 MME.

In reviewing an alert, a pharmacist may need to consult with the prescribing provider to confirm the need for the prescription.

Additionally, CMS is allowing Part D plans to implement a drug management program limiting access to "frequently abused" controlled substances for atrisk patients. Limiting access means that the patient might only be able to obtain these medications from a specified prescriber or pharmacy. For 2019, CMS has identified opioids and benzodiazepines as frequently abused drugs.

Residents of long-term care facilities, those in hospice care, patients receiving palliative or end-of-life care, and patients being treated for active cancer-related pain are exempt from these interventions.

More information on the CMS 2019 Opioid Overutilization Policies: <a href="https://www.cms.gov/Outreach-and-Education/Medicare-Learning-Network-MLN/MLNMattersArticles/downloads/SE18016.pdf">https://www.cms.gov/Outreach-and-Education/Medicare-Learning-Network-MLN/MLNMattersArticles/downloads/SE18016.pdf</a>.

#### **Chronic and Acute Opioid Guidelines**

The OMB has endorsed the Oregon Chronic Opioid Prescribing Guidelines and the Oregon Acute Opioid Prescribing Guidelines.

The Board highly encourages all prescribing professionals to read and follow these Guidelines in their practices.

Both documents are available at <a href="https://www.oregon.gov/omb/Topics-of-Interest/Pages/Pain-Management.aspx">https://www.oregon.gov/omb/Topics-of-Interest/Pages/Pain-Management.aspx</a>.



## The Oregon Wellness Program: An Update

Contributed by Donald E. Girard, MD, MACP, Oregon Medical Board, Member Emeritus

The Oregon Wellness Program (OWP) for health care professionals now provides counseling services that are totally confidential, accessible, and free. Services are available through a single contact phone number and are provided by qualified, experienced psychologists or psychiatrists for up to eight visits per year. Visits are not traceable, and no records are retrievable.

#### The Need

The inception of the OWP came at a time when provider burnout was increasingly recognized as a problem. National experts report burnout using the Maslach Inventory, a validated survey that identifies an individual health care professional's risk for loss of professional interest, attrition from one's career, poor patient care, substance use disorders, and even suicide. Oregon providers are not immune from the pressures that lead to burnout, and it became clear that it was time for action.

#### The Program

The OWP was launched into reality through a partnership between Oregon Medical leadership, professional societies and health care institutions, including the Oregon Medical Association, the Central Oregon Medical Society, the Lane County Medical Society, the Marion Polk County Medical Society, the Medical Society of Metropolitan Portland, the Oregon Health & Science University, and the administrative Health System. The responsibilities were vested in the Foundation for Medical Excellence, a highly reputed non-profit, while decision-making authority was given to the OWP's Executive Committee. A larger group of interested and invested parties, the OWP Consortium, advises the Executive Committee.

The goal was to develop a program that eliminated as many barriers as possible for health care professionals obtaining help. Health care professionals are inordinately concerned that seeking help through other health care professionals and, in particular, mental health care professionals, will precipitate their being labeled as incompetent and reported to their licensing board with inevitable licensure consequences. On the contrary, the professional boards support their licensees obtaining help to prevent or lessen the risk of impairment.

The founders of the OWP made every effort to remove deterrents to seeking care. Thus, services are free; insurance is not billed; licensees are not reported to the Board; services are confidential; and records are not retrievable.

Only psychologists or psychiatrists referred by their local medical societies and vetted by the Medical Director of the OWP provide services. The health care professionals have the choice of working with any vetted professional as listed on the OWP website, regardless of where that individual is practicing. For those individuals whose location is not proximate to a provider, telemedicine services are available.

#### The Future

To ensure the program's success, research on effectiveness and outcomes will begin in 2019. The Biostatistics Division of the OHSU School of Public Health has developed a research tool to evaluate the program's outcomes. Individuals completing the survey will receive a personal code and cannot be identified.

The hope is that this program will help guide health care professionals to a more positive and empowered place that will renew the wonder of the profession. Health care professionals are, of course, central to the safety and health of the community in which they practice. Thus, health systems have an incentive to ensure the wellbeing of their health care professionals. The same is true for the Oregon Medical Board, which is committed to promoting wellness among its licensees as well as protecting patients. An essential way to protect the public is to help keep those licensed professionals well themselves as they provide their care to others.  $\blacksquare$ 



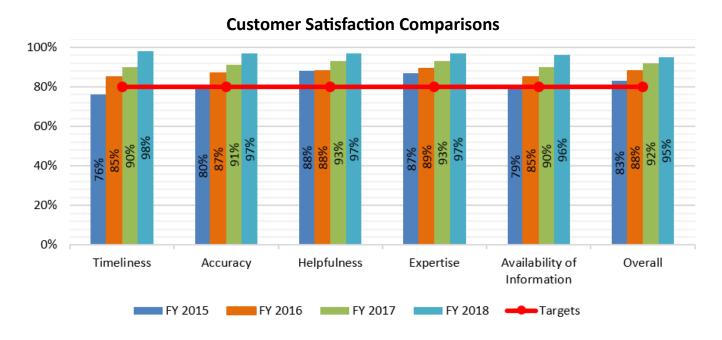
The Oregon Wellness Program promotes Oregon Health care Professionals' well-being through education, coordinated regional counseling services, telemedicine services, and research.

> 541-242-2805 www.oregonwellnessprogram.org

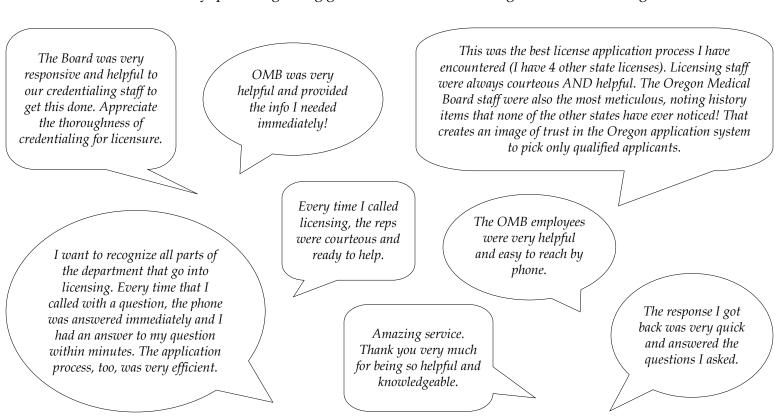
Page 4 Spring 2019

## 2018 Customer Satisfaction Survey Results

The Oregon Medical Board prides itself on the strong customer service we provide to applicants, licensees, and the public. The chart below showcases the OMB's continuous growth in customer satisfaction.



Each customer satisfaction survey provides OMB customers with the opportunity to provide additional comments. Below are several noteworthy quotes regarding general information, investigations, and licensing.



The OMB encourages all applicants, licensees, and members of the public to participate in the Customer Satisfaction Survey after interacting with Board staff. •

## Licensees' Publicly Available Information

#### **Address and Contact Information**

The Board is excited to announce that patients and other health care providers will soon be able to find our licensees' full practice address and contact information through the OMB website at <a href="https://omb.oregon.gov/verify">https://omb.oregon.gov/verify</a>. Up to now, only city and county information has been available directly on our website.

To review and update your address and ensure that accurate information is available to the public, please log in to <a href="https://omb.oregon.gov/login">https://omb.oregon.gov/login</a> and update your contact information. Please note that both Mailing Address and Practice Addresses are considered public information and will be available to the public. Home addresses are kept confidential.

#### Languages Spoken

In addition, beginning January 2020, the Licensee Search page will include other languages spoken by our licensees. During renewal season this year, licensees will have the opportunity to review and edit their languages spoken, keeping in mind that this information will be available on our website, and that the languages chosen should be ones in which the licensee can communicate adequately for clinical purposes. Previously, this information was only available by calling or submitting a public records inquiry in writing to the Oregon Medical Board.

#### **Updating Your Information**

During renewals in the fall of 2019, licensees will have the opportunity to review and edit their practice and mailing addresses and their languages spoken. Questions should be directed to the Board at 971-673-2700 or Info@omb.oregon.gov. +

# Spotlight on Practice: New Research on Pain Management Messaging

#### Join us for a webinar to learn more:

- **n** painmanagementwebinar.eventbrite.com
- Wednesday, July 17 from 6 8pm
- Register by July 8





The opioid epidemic sweeping the nation has hit Oregon hard and it's hurting our families and our communities throughout the state.

OHA has teamed up with Brink
Communications and Goodwin Simon
Strategic Research to develop a new
public engagement campaign that is
prevention-focused and designed to help
empower patients to manage acute pain
without opioid prescription painkillers.

The webinar will include an overview of groundbreaking research aimed at uncovering how people think about short-term pain and pain management. We'll also provide strategies and research-tested messages that you can leverage to drive change in your own work.

Questions? Contact Marian Hammond at marian@brinkcomm.com.

Page 6 Spring 2019

## **Annual Report on Physician Assistant Dispensing**

The Oregon Medical Board is committed to ensuring appropriate delegation and adequate supervision by all of its supervising physicians for the health, safety, and wellbeing of the public. A supervising physician is responsible for the actions of the physician assistant under their supervision at all times.

In June 2019, the Board will conduct a review of supervising physicians and physician assistants whose dispensing privileges are documented in a Practice Agreement. The purpose of this review is to ensure compliance with the laws and regulations governing supervision of physician assistants.

State law requires this review. Specifically, Oregon Revised Statute 677.511(2)(b)(B) states that a physician who supervises a physician assistant with dispensing authority must "submit an annual report to the Board on the physician assistant's use of dispensing authority." The Board aims to help physicians meet this requirement with this streamlined reporting process.

Board staff will notify supervising physicians by June 2019 by letter and e-mail. The supervising physicians must respond within 30 days. Failure to respond to the inquiry may subject the supervising physician to a fine and further disciplinary action by the Board, in accordance with OAR 847-050-0040(5)(10).

For additional information regarding the requirements and responsibilities of supervising physicians dispensing authority, please visit <a href="https://www.oregon.gov/omb/licensing/Pages/Dispensing-Authority-for-Physician-Assistants.aspx">https://www.oregon.gov/omb/licensing/Pages/Dispensing-Authority-for-Physician-Assistants.aspx</a>.



# DEA Warns Public of Extortion Scam by DEA Special Agent Impersonators

The Drug Enforcement Administration is warning the public, including the DEA registrant community, about criminals posing as DEA Special Agents, DEA Investigators, or other law enforcement personnel as part of an international extortion scheme.

The criminals call the victims (who in most cases previously purchased drugs over the internet or by telephone) and identify themselves as DEA agents or law enforcement officials from other agencies. The impersonators inform their victims that purchasing drugs over the internet or by telephone is illegal and that enforcement action will be taken against them unless they pay a fine. In most cases, the impersonators instruct their victims to pay the "fine" via wire transfer to a designated location, usually overseas. If victims refuse to send money, the impersonators often threaten to arrest them or search their property. Some victims who purchased their drugs using a credit card also reported fraudulent use of their credit cards. Another scheme involves criminals contacting doctors and pharmacists and stating that they are the subject of an investigation and demanding money to clear up the matter.

The public should be aware that no DEA agent will ever contact members of the public by telephone to demand money or any other form of payment.

For more information, visit https://www.deadiversion.usdoj.gov/pubs/pressreleases/extortion\_scam.htm.

# Creating Our Own Future Health Care Workforce in Oregon

Contributed by Katherine Fisher, DO, of the Western University of Health Sciences/COMP-NW DO program

Preceptor and teaching future physicians and physician assistants provides several benefits. Preceptors tend to find it easier to stay up to date on current practices, earn CME credits for the time spent precepting students, gain access to university electronic libraries, and often find that teaching students in their practice renews their sense of pride and enjoyment of the practice of medicine. There is a current need for more physicians throughout the state of Oregon to become clinical preceptors.

Most medical professionals, whether DO, MD, or PA, benefitted in their early training from working under the auspices of a clinical preceptor. Getting out of ivory tower institutions prepares trainees for a life of medical practice in the real world. Over the past 100 years, medical training has followed a pendulum, moving clinical training out of the community into university tertiary care institutions and now back to the community setting so students may experience the type of setting they will most likely practice in one day.

Today, Oregon has two medical schools, OHSU and COMP-Northwest (the Oregon site of Western University of Health Sciences, Pomona, CA) and two PA schools, OHSU and Pacific University. There are also medical and PA schools from out of state who send students to Oregon for their clinical rotations. All programs are seeking qualified licensed clinicians across the state to become teaching preceptors in their current practice setting. In this era of instant information, preceptors do not need to lengthen their day teaching didactics to the student; students have online curriculum requirements to manage that aspect. What students need from practicing physicians is to see and be an active participant in patient care in the community setting. The MD, DO, and PA programs are firmly committed to building a robust health care workforce to meet the needs of Oregonians who live and work everywhere in our state, in particular the rural areas of the "96,000 square mile campus." Ideally, every student should complete at least one clinical rotation in a rural setting.

The DO medical students from COMP-Northwest are based for their third year in one of its core areas:

Medford, Roseburg, Eugene/Springfield, the Corvallis area (including rural sites, Newport and Lincoln City), Salem/McMinnville, Portland, Astoria and the Bend area (including rural sites Redmond, Prineville and Madras). COMP-Northwest is located in Lebanon, Oregon, giving students a rural lifestyle right from the start. COMP-Northwest is looking for physicians (MD or DO) in all specialties for core and elective rotations.

In three regions of Oregon, centered around Coos Bay, Klamath Falls, and La Grande, OHSU has established Campus for Rural Health sites with local leadership and staff to support interprofessional education of students in all OHSU programs - nursing, physician assistant, medicine, human nutrition, dentistry, and pharmacy. Beyond that, OHSU continues relationships with clinics and hospitals distributed in all parts of Oregon, from Harney County to Clatsop, and everywhere in between. The Physician Assistant program and the MD program are looking for qualified clinicians in any specialty, practicing anywhere in Oregon, who are interested in teaching, to join the volunteer faculty program and share their expertise by hosting PA and MD students.

Please consider precepting students as part of your practice. Physicians and PAs, rural and urban, who would like more information about teaching students and helping to shape the future of health care in Oregon may contact the individuals below. Each school provides training for qualified providers so one does not have to have prior experience to be accepted.

Katherine Fisher, DO, of the Western University of Health Sciences/COMP-NW DO program <a href="mailto:kfisher@westernu.edu">kfisher@westernu.edu</a>

Paul Gorman, MD, of the OHSU MD program gormanp@ohsu.edu

Ileana Esquivel, PA-C, of the OHSU PA program <a href="mailto:esquivel@ohsu.edu">esquivel@ohsu.edu</a>

Leah Baldwin of the Pacific University PA program <a href="mailto:eahbaldwin@pacificu.edu">eahbaldwin@pacificu.edu</a> **★** 

Page 8 Spring 2019

# OREGON ADMINISTRATIVE RULES

Rules proposed and adopted by the Oregon Medical Board.

The Oregon Medical Board and other state agencies operate under a system of administrative rules to ensure fairness and consistency in procedures and decisions. Periodically, these Oregon Administrative Rules (OARs) must be amended in response to evolving standards and circumstances. OARs are written and amended within the agency's statutory authority granted by the Legislature.

Rules go through a First and Final Review before being permanently adopted. Temporary rules are effective after First Review, but they expire in 180 days unless permanently adopted after a Final Review. Official notice of rulemaking is provided in the Secretary of State *Bulletin*. The full text of the OARs under review and the procedure for submitting comments can be found at: <a href="http://omb.oregon.gov/rules">http://omb.oregon.gov/rules</a>.

#### PROPOSED RULES

First Review

#### OAR 847-005-0005, 847-005-0008, 847-005-0010: Fees

The proposed rule amendments increase readability by separating licensing and public record charges into different rules. For public record charges, the proposed changes align the Board's public record request charges with the Oregon Department of Administrative Services' (DAS) statewide fees and charges policy, 107-001-030. The proposal also repeals an outdated rule related to copying charges.

# OAR 847-008-0070: Continuing Medical Competency (Education)

The proposed rule amendment clarifies the current practice of allowing ongoing participation in a program of recertification or maintenance of certification, including life long learning programs, by a specialty board will satisfy continuing medical competency requirements for maintenance of licensure.

#### **ADOPTED RULES**

There were no adopted rules this quarter.

# **Emergency Medical Services (EMS) Advisory Committee Opening**

The Oregon Medical Board and its EMS Advisory Committee are seeking letters of interest and curricula vitae (CV) from physicians interested in serving on the Committee. The physician must be a licensed, actively practicing physician who is a supervising physician, medical director, or practicing emergency medicine physician.

The Committee is composed of two physician members, three EMS members, and one public member. The term of office is three years and members may serve no more than two terms. The Committee meets four times a year with additional meetings or conference calls if necessary.

The Committee's purpose and major objective is to help ensure the availability of safe, professional medical services to the people of Oregon. The Committee makes recommendations to the Board on matters of scope of practice for all levels of emergency medical services providers and requirements and duties of supervising physicians. The Board then takes final action based upon those recommendations.

Interested applicants may submit a CV and a letter of interest addressing the following areas:

- Educational/training/practice experience
- Any committee or team experience
- Why you are interested in serving as a member on the EMS Advisory Committee

Interested applicants may visit www.oregon.gov/omb/board/Pages/Board-and-Committee-Vacancies.aspx for more information.

The Committee will interview interested applicants during its meeting on August 16, 2019, and forward recommendations for a new member to the Board. The Board will appoint the new member to the Committee at its regular meeting.

#### **BOARD ACTIONS**

January 16, 2019 – April 15, 2019

Many licensees have similar names. When reviewing Board Action details, please review the record carefully to ensure that it is the intended licensee.

#### **INTERIM STIPULATED ORDERS**

These actions are not disciplinary because they are not final orders, but are reportable to the national data banks.\*

#### ALLCOTT, John V., III, MD; MD11435 Eugene, OR

On March 4, 2019, Licensee entered into an Interim Stipulated Order to voluntarily cease the initiation of chronic pain treatment with opioids; taper current chronic pain patients to 90 MED or less or transfer care of the patient, unless the patient is taking buprenorphine or buprenorphine/naloxone; limit prescribing for acute pain; taper concurrent benzodiazepines or transfer care of the patient; cease prescribing concurrent benzodiazepines or muscle relaxants with opioids; and obtain an annual EKG for all patients taking methadone pending the completion of the Board's investigation into his ability to safely and competently practice medicine.

# ERICKSON, Carl M., DO; DO12690 Portland, OR

On April 5, 2019, Licensee entered into an Interim Stipulated Order to voluntarily cease the initiation of chronic pain treatment with opioids; taper current chronic pain patients to 90 MED or less or transfer care of the patient, unless the patient is taking buprenorphine or buprenorphine/naloxone; limit prescribing for acute pain; taper concurrent benzodiazepines or transfer care of the patient; cease prescribing concurrent benzodiazepines or muscle relaxants with opioids; and obtain an annual EKG for all patients taking methadone pending the completion of the Board's investigation into his ability to safely and competently practice medicine.

#### HOPSON, Jane K., PA; PA01299 Hillsboro, OR

On April 8, 2019, Licensee entered into an Interim Stipulated Order to voluntarily withdraw from practice and place her license in Inactive status pending the completion of the Board's investigation into her ability to safely and competently practice medicine.

#### **DISCIPLINARY ACTIONS**

These actions are reportable to the national data banks.\*

#### ANDERSON, Jodee M., MD; MD26587 Portland, OR

On April 11, 2019, Licensee entered into a Stipulated Order with the Board for unprofessional or dishonorable conduct; gross or repeated acts of negligence; and willful violation of any rule adopted by the Board. This Order reprimands Licensee; places Licensee on probation for a minimum of 10 years; requires Licensee to remain enrolled and in good standing in a monitoring program; restricts Licensee from prescribing any controlled substances; requires Licensee to only practice at pre-approved sites; requires Licensee to maintain a therapeutic relationship with a pre-approved health care provider; and subjects Licensee to no-notice chart audits and office visits by the Board's designee.

#### DEYO-BUNDY, Brittany J., MD; MD168555 Salem, OR

On April 11, 2019, Licensee entered into a Stipulated Order with the Board for unprofessional or dishonorable conduct; conviction of any offense punishable by incarceration in a Department of Corrections institution or in a federal prison; willful violation of any provision of the Medical Practice Act; violation of the federal Controlled Substances Act; and prescribing controlled substances without a legitimate medical purpose. This Order revokes Licensee's medical license, however the revocation is stayed; assesses a \$5,000 civil penalty; places Licensee on probation; requires Licensee to enroll in a monitoring program; requires Licensee to obtain a pre-approved practice mentor who will provide quarterly reports to the Board; prohibits Licensee from prescribing any Schedule II, III, or IV medications; requires Licensee to only practice at pre-approved sites; and subjects Licensee to no-notice chart audits and office visits by the Board's designee.

#### JOYNER, Lisa C., MD; MD21092 Milwaukie, OR

On April 11, 2019, Licensee entered into a Stipulated Order with the Board for unprofessional or dishonorable conduct; gross or repeated acts of negligence; willful violation of any rule adopted by the Board; and prescribing controlled substances without a legitimate medical purpose or without following accepted procedures for examination of patients or for record keeping.

(Continued on page 10)

Page 10 Spring 2019

This Order reprimands Licensee; assesses a \$10,000 civil penalty, \$5,000 held in abeyance; places Licensee on probation for a minimum of 5 years; subjects Licensee to no-notice chart audits and office visits by designee; restricts Licensee from prescribing, dispensing, distributing or buprenorphine/naloxone to any patient; restricts Licensee from accepting any patients needing Medication Assisted Treatment for opioid use disorder; restricts Licensee from prescribing, dispensing, or distributing opioid medication to any patient; and restricts Licensee from prescribing any benzodiazepine to any patient being prescribed opiates for chronic pain.

### POPOWICH, Yale S., MD; MD26661 Portland, OR

On April 11, 2019, Licensee entered into a Stipulated Order with the Board for unprofessional dishonorable conduct; gross or repeated acts of negligence; and willful violation of any rule adopted by the Board. This Order reprimands Licensee; suspends Licensee's license for a total of 90 days; assesses a \$10,000 civil penalty; places Licensee on probation for 5 years; requires the presence of a medically trained chaperone for all clinical encounters; subjects Licensee to no-notice chart audits and office visits by the Board's designee; restricts Licensee from scheduling his own patient appointments; restricts Licensee from having social media contact or electronic communication for personal purposes with patients; requires Licensee to have a pre-approved practice monitor; requires that Licensee enter into treatment with a pre-approved health care provider; requires that Licensee develop and submit a plan for maintaining boundaries and professionalism; requires Licensee to undergo a reassessment at Acumen Assessments; and requires Licensee to undergo polygraph compliance monitoring.

#### PRIOR ORDERS MODIFIED OR TERMINATED

#### ADAMS, Justin R., MD; MD156479 Medford, OR

On April 11, 2019, the Board issued an Order Terminating Stipulated Order. This Order terminates Licensee's 2017 Stipulated Order.

#### GIRARD, Ryan J., LAc; AC152617 Brookings, OR

On February 19, 2019, the Board issued an Order Terminating Order of License Suspension. This Order

terminates Licensee's October 2, 2017, Order of License Suspension.

#### HARRISON, Patrick T., DO; DO184926 Hermiston, OR

On April 11, 2019, the Board issued an Order Terminating Interim Stipulated Order. This Order terminates Licensee's 2019 Interim Stipulated Order.

#### KAHN, Heather A., MD; MD22858 Grants Pass, OR

On April 11, 2019, the Board issued an Order Terminating Stipulated Order. This Order terminates Licensee's 2017 Stipulated Order.

#### MORGAN, Shawn M., MD; MD23459 Oregon City, OR

On February 7, 2019, the Board issued an Order Terminating Interim Stipulated Order. This Order terminates Licensee's September 25, 2018, Interim Stipulated Order.

#### SHERER, Kevin E., MD; MD156626 Bend, OR

On February 7, 2019, the Board issued an Order Terminating Interim Stipulated Order. This Order terminates Licensee's June 15, 2018, Interim Stipulated Order.

# Community Workers' Compensation

Your time is valuable, as is your perspective and experience. The Oregon Workers' Compensation Division needs your valued feedback to address issues pertaining to medical access for injured workers. Your insight and responses will allow the division to address issues that affect both providers and injured workers.

Would you please take a short survey, <a href="http://dcbs.az1.qualtrics.com/jfe/form/SV\_0HV1LpB5Cy5VY2h">http://dcbs.az1.qualtrics.com/jfe/form/SV\_0HV1LpB5Cy5VY2h</a> and help make the workers' compensation system better? The survey takes approximately 5-10 minutes and you can remain anonymous. At the end of the survey, you can chose to click on a survey link to enter a raffle for free registration at Oregon's 2019 Workers' Compensation Educational Conference.

If you have any questions, contact Carrie Van Handel at <a href="mailto:carrie.c.vanhandel@oregon.gov">carrie.c.vanhandel@oregon.gov</a> or 503-947-7679.

#### NON-DISCIPLINARY BOARD ACTIONS

These actions are not disciplinary and are not reportable to the national data banks.\*

#### **CORRECTIVE ACTION AGREEMENTS**

These agreements are not disciplinary orders and are not reportable to the national data banks\* unless they relate to the delivery of health care services or contain a negative finding of fact or conclusion of law. They are public agreements with the goal of remediating problems in the Licensees' individual practices.

# OTTENHEIMER, Edward J., III, MD; MD20394 Roseburg, OR

On April 11, 2019, Licensee entered into a non-disciplinary Corrective Action Agreement with the Board. In this Agreement, Licensee agreed to complete a CPEP evaluation; contract with CPEP for the development of any education plan; complete the CPEP education plan; and complete a pre-approved course on professionalism.

#### PATEL, Jitendra C., MD; MD15202 Brookings, OR

On April 11, 2019, Licensee entered into a non-disciplinary Corrective Action Agreement with the Board. In this Agreement, Licensee agreed to complete a CPEP evaluation; contract with CPEP for the development of any education plan; and complete the CPEP education plan.

# CONSENT AGREEMENTS FOR RE-ENTRY TO PRACTICE

These actions are not disciplinary and are not reportable to the national data banks.\*

# BARBA-BASILAN, Denise S., MD; MD189073 Salem, OR

On February 26, 2019, Applicant entered into a non-disciplinary Consent Agreement for Re-Entry to Practice with the Board. In this Agreement, Applicant agreed to practice under the supervision of a preapproved mentor for six months, to include chart review and reports to the Board from the mentor, and to obtain re-certification from the American Board of Family Medicine within six months.

#### DOOLEY, Ericka R., LAc; AC140943 Portland, OR

On March 25, 2019, Licensee entered into a non-disciplinary Consent Agreement for Re-Entry to Practice with the Board. In this Agreement, Licensee agreed to complete a 200-hour mentorship with a Board-approved clinical supervisor; and complete 15 hours of continuing education units.



# OHSU Library Resources for Oregon Licensees

The OHSU Library provides services to health care professionals licensed to practice in Oregon and not otherwise affiliated with OHSU. By state statute, the Medical Board collects fees for the OHSU Library at the time of initial licensure and renewal. These fees allow access to resources such as AccessMedicine Database, free article delivery via PubMed, and the ability to request and check out library books and journals.

For more information, visit <a href="http://libguides.ohsu.edu/orhp">http://libguides.ohsu.edu/orhp</a>.

#### NEU, Kelly C., LAc; AC189118 Bend, OR

On February 6, 2019, Applicant entered into a non-disciplinary Consent Agreement for Re-Entry to Practice with the Board. In this Agreement, Applicant agreed to complete a 160-hour mentorship with a Board-approved clinical supervisor.

#### SHORTRIDGE, Terry W., MD; MD16008 Lebanon, OR

On February 27, 2019, Licensee entered into a non-disciplinary Consent Agreement for Re-Entry to Practice with the Board. In this Agreement, Licensee agreed to have a board-certified surgeon act as the first assistant during his first 30 surgical cases; have a board-certified surgeon review all inpatient charts and 20 outpatient charts; and meet with a board-certified surgeon every two weeks to review cases for the first six weeks of practice, followed by monthly meetings for an additional three months with reports to the Board.

#### TOUCHET, Seth L., LAc; AC191701 Portland, OR

On April 4, 2019, Applicant entered into a non-disciplinary Consent Agreement for Re-Entry to Practice with the Board. In this Agreement, Applicant agreed to complete a 160-hour mentorship with a Board-approved clinical supervisor.

**Oregon Medical Board** 

1500 SW 1st Ave, Suite 620 Portland, OR 97201 971-673-2700 www.oregon.gov/OMB

#### **UPCOMING MEETINGS**

May 2, 7:30 a.m.

**Investigative Committee** 

June 6, 7:30 a.m.

**Investigative Committee** 

June 7, 12:00 p.m.

Acupuncture Advisory

Committee

June 12, 5:00 p.m.

Administrative Affairs Committee

July 11-12, 8:00 a.m.

**Board Meeting** 

#### **OFFICE CLOSURES**

Monday, May 27

**Memorial Day** 

Thursday, July 4

**Independence Day** 

#### **OFFICE HOURS**

8:00 a.m. - 5:00 p.m. (closed noon to 1:00 p.m.)

#### **CONTACT**

E-mail: info@omb.oregon.gov

Phone: 971-673-2700

#### APPLICANT/LICENSEE SERVICES (new applications,

renewals, address updates, practice agreements, and supervising physician applications):

https://omb.oregon.gov/login

#### **LICENSING CALL CENTER:**

9 am to 12 pm and 1 pm to 3 pm

Phone: 971-673-2700

E-mail: <u>licensing@omb.oregon.gov</u>

#### SIGN UP TO RECEIVE E-MAIL NOTICES:

#### **Administrative Rules:**

https://omb.oregon.gov/subscribe-rules

#### **Board Action Reports:**

https://omb.oregon.gov/subscribe-actions

#### **EMS Interested Parties:**

https://omb.oregon.gov/subscribe-ems

#### **OMB Report** (quarterly newsletter):

https://omb.oregon.gov/subscribe-newsletter

#### **Public Meeting Notice:**

https://omb.oregon.gov/subscribe-meetings

#### **Quarterly Malpractice Report:**

https://omb.oregon.gov/subscribe-malpractice